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| Attorney or Party Name, Address, Phone & Fax Nos.,<br>State Bar No. & Email<br><br>Benjamin Heston<br>Bar Number: 297798<br>Nexus Bankruptcy<br>3090 Bristol Street #400<br>Costa Mesa, CA 92626<br>Phone: (949) 312-1377<br>Email: <a href="mailto:ben@nexusbk.com">ben@nexusbk.com</a><br><br><input type="checkbox"/> Debtor(s) appearing without an attorney<br><input checked="" type="checkbox"/> Attorney for Debtor(s) | FOR COURT USE ONLY   |
| <b>United States Bankruptcy Court<br/>Central District of California - Santa Ana Division</b>  |  |
| In re:<br>Terri-Lyn Fassio   | CASE NO.:<br><br>CHAPTER: Chapter 7  |
|  | <b>DECLARATION BY DEBTOR(S)<br/>AS TO WHETHER INCOME WAS RECEIVED<br/>FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION<br/>DATE</b><br><br>[11 U.S.C. § 521(a)(1)(B)(iv)] |
| Debtor(s).   | [No hearing required]  |

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

**Declaration of Debtor 1**

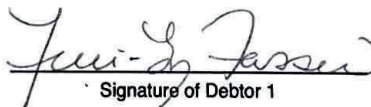
1. ☒ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date ( **Check only ONE box below** ):

- ☐ I was paid by an employer. Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)
- ☒ I was not paid by an employer because I was either self-employed only, or not employed.

Date: 09/05/2024

Terri-Lyn Fassio  
Printed name of Debtor 1

  
Signature of Debtor 1

**Declaration of Debtor 2 (Joint Debtor) (if applicable)**

2. ☐ I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date ( **Check only ONE box below** ):

- ☐ I was paid by an employer. Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. (If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)
- ☐ I was not paid by an employer because I was either self-employed only, or not employed.

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed name of Debtor 2

\_\_\_\_\_  
Signature of Debtor 2